FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

File with: lowe Ethics and Campaign Disclosure Board 510 E. 12^h, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

IA ETHICS AND -ANDAIGH DISOLOSURE BE Effective January 1, 2010, all statements and reports filed by new compilities for state office must be filed electronically and effective January 1, 2070 all JAN -8 PM 12: 54 statements and reports filed by all committees for state office must be filed

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

		Cana saa		
COMMITTEE NAME (Must be same as on Statement of Or	genization)	h- 10		
AUDUBON COUNTY DEMOCRATIC CENTRAL C	OMMITTEE	1	FORM	
IMPORTANT: Indicate by # type of committee you are reporting to	- 7		DR-2	DISCLOSURE
1 (1)SERSWIDS/LDGISIS/WO/JUMPS STANGED for Beternion Condition	A TANKE TO A A A A A A A A A A A A A A A A A A	}	(Rev. 12/20)	
		olitical		
Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	Di Board or Other Political Subdivision	n PAC (For Office Us	A OUR CALLOS
CANDIDATE COMMITTEES ONLY:			Comm.# Logged In 11	(1/A), (LA)
Candidate Name	Political Party (if applicat		Scanned A	
	_	· 11	Scanned 111 Computer	W
Office Sought	District (If Senate or Hou		Computer Audited	
		' I I		l l (
ate reports are subject to possible civil and criminal penalties. Prantidate's committee, and the chairperson, for any other time of	ursuant to lows Code sections 885	3.32A(7) and 6	8A 401/3) #h	a cardidate for a
candidate's committee, and the chairperson, for any other type of	committee, is the individual respo	nsible for filing	timely and ac	curate reports.
m 1 01			,	
My Jou Johansen	7/2-5-63-21	10	1/0	1/3010
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	- / -	/ DA	E SIGNED
AM FILING A JAN 1 THRU DEC 31, 2009	REPORT FOR (1) ELECT	ION //2\NON	ELECTION	YEAD
(report date)	Indicate	by # 2		
ICHECK IF AMENDMENT TO REPORT DATED			· · · · · · · · · · · · · · · · · · ·	
		Local Con	nmittees, ente	Data of Election
Check if this is final (termination) report and attach Notice	of Dissolution Form DR-3.			
(You must continue to file reports until a DR-3 is filed	4.)	County &	Local Committ Won is hald	ees. enter County In
		AUDU		
STATEMENT OF CASH ON HAN	<u> </u>			
ASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the	cash on hand of the and			
of the last reporting period or must be zero if this is fi	rst report filed.)	s	134.08	
ADD TOTAL MONEY TAKEN IN THIS PERIOD	,	•		
Schedule A: Cash Contributions total (Attach Sched	ule A) ("also see in-kind below)		793,50	
Schedule F: Loans Received total (Attach Schedule	F)	*******************		
Schedule H: Total Salas of Campaign Property (Atta	ich Schedule HI	***************		***
(Schedule Happlies to Candidates' Comp	nittees Onks	•••••		
			927.58	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	SUB-TOTAL		727.30	
			100.00	
Schedule B: Expenditures total (Attach Schedule B)	(""ālso see dabts and loans belo	w)	198.03	Tal Arm
Schedule F: Loan Repayments total (Attach Schedul				
ASH ON HAND at the end of this reporting period (if final rep	ort balance must be zero)	\$	729,55	
JNPAID BILLS (From Schedule D - Attach Schedule D)				
N KIND CONTRIBUTIONS (From Schedule E - Attach Sched	(u) E)			
DUTSTANDING LOANS (From Schedule F - Attach Schedule	▲ F\			
DNSULTANT BREAKDOWN (Schedule G Attached?)	• · /			
NDIDATE COMMITTEES ONLY:		-	_YES	_ NO
——————————————————————————————————————				
LUE OF CAMPAIGN PROPERTY (From Schedule H - Attac		\$		
ATE COMMITTEES: Submit a reconciled campaign accoun	t bank statement in January of e	ach year.		

Resci Form

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) AUDUBON COUNTY DEMOCRATIC CENTAL COMMITTEE

7125634677

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC ILIENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNTI RECEIVED	√ IF FOR FUND- RAISER
8/11/09	ID# CK#	FAIR POPCORN SALES		\$ 1.50	INCOME
8/17/09	(D# CK#	UNITEMIZED CONTRIBUTIONS		145.00	
9/29/09	ID# CK#	UNITEMIZED CONTRIBUTIONS		4-17.00	1
10/9/09	ID#	UNITEMIZED CONTRIBUTIONS		80.00	1
10/9/0 9	ID# CK#	LOVILA HANSEN 106 CIRCLE DR AUDUBON IA 50025		100.00	1
10/14/09	CK#	UNITEMIZED CONTRIBUTIONS		20.00	1
, , , , ,	ID#		 		
	CK#				
	ID#	***	-		
1	CK#				
	ID#				
	CK#			į	<u> </u>
	ID#		 		
	CK#				
·			SUB-TOTAL	-	

"Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consequinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

793.50

TOTAL (If last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

10.00	Vestilat	44.00	
0.2	COC		m
LOWING.			

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE (DENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD,

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization) AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6/29/09	ID# CK#	AUDUBON CO FAIR ASSOC %GARY VAN AERNAM 2810 - 280TH ST EXIRA IA 50076	FAIR BOOTH	\$ 85.00
7/28/09	ID# CK#	MARY LOU JOHANSEN 127 PACIFIC AVE AUDUBON IA 50025	POPCORN OIL	8.03
9/28/09	ID#	ACHS %ARCH ANDERSEN 802 BROOKSIDE AUDUBON IA 50025	RENT FOR FUNDRAISER	35.00
10/14/09	ID# CK#	AUDUBON CO NEWSPAPER 517 LEROY AUDUBON IA 50025	AD FOR FUNDDRAISER	70.00
	ID#			
	ID#			
į	CK#			
	ID# CK#			
	ID#			
	CK#			
			SUB-TOT TOTAL (if last page of this sched	\

THIS BOX APPLIES TO CANDIDATES' CO	MMITTEES ONLY:
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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behelf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

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